Application No. 10023001/99508 P (PROV) Precinct No. 0019 A

Instructions: (1) Accomplish separately in three copies; (2) print legibly; and (3) check the appropriate box.

Part 1 PERSONAL INFORMATION (To be filled out by Applicant)

NAME
Last: Villanueva
First: Daniel Kenneth
Middle: Tan

☐ Illiterate ☐ Person with Disability
☐ Indigenous People
Assisted by: _____ (Please fill-up Supplemental Data Form/Assistor's Oath)

RESIDENCE/ADDRESS Province: Metro Manila
City/Municipality: Makati Barangay: San Lorenzo
House No. / Street: 23-A Hernandez st.

CITIZENSHIP: Filipino ☑ By Birth ☐ Naturalized ☐ Reacquired
(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)
Date of Naturalization/ Reacquisition: Month ___ Day ___ Year ___ Certificate No. /Order of Approval ___

PERIOD OF RESIDENCE
In the City/Mun: No. of Years 10 No. of Months 00
In the Philippines: No. of Years 20

PROFESSION / OCCUPATION: Student TIN ___

SEX: ☑ Male ☐ Female
DATE OF BIRTH: Month 04 Day 21 Year 2000
PLACE OF BIRTH: City/ Mun Pasay Province Metro Manila

CIVIL STATUS: ☑ Single ☐ Married
Name of Spouse, If Married ___

PART 2 OATH

☑ REGISTRATION ☐ TRANSFER

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualifications of a voter and that I am ☑ not registered in any precinct or ☐ registered in a precinct of another City/Municipality/District in the Philippines. Further, I give consent to the processing of the information stated herein by the Commission on Elections for registration, election and other purposes as may be provided by law including B.P. Blg. 881, R.A. No. 8189, R.A. No. 10367 and R.A. 10173 also known as the Data Privacy Act of 2012.

Date: Month 11 Day 21 Year 2000

Signature of Applicant
Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb | Right Thumb

1 ___
2 ___
3 ___

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

☐ Approved ☐ Disapproved
Month ___ Day ___ Year ___ DATE
With Precinct Assignment No. ___
Reason for disapproval ___

Member (Signature above Printed Name)
Chairman of the Board (Signature above Printed Name)
Member (Signature above Printed Name)

Part 4 VOTER'S IDENTIFICATION NUMBER (To be filled out by Election Officer)

Part I: Prov Code / City/Mun/ Dist. Code
Part II: Precinct Assignment
Part III: Month Day Year Name Code / Birth Code

ACKNOWLEDGEMENT RECEIPT

Type of Application
○ Registration ○ Transfer with Reactivation
○ Transfer ○ Change of Name/Correction of Entry
○ Reactivation ○ Reinstatement/Inclusion

Application for Registration
Last ___
First ___
Middle ___

Application No. ___

This is to acknowledge receipt of your application. Your application is subject for Approval/Disapproval by the Election Registration Board (ERB). You need not appear in the ERB hearing unless required through a written notice.
Date of ERB Hearing ___

EO/ Interviewer Signature above Printed Name

Republic of the Philippines
COMMISSION ON ELECTIONS
Intramuros, Manila

REVISED CEF

Instruction : **Fill-in completely and legibly the appropriate spaces and check appropriate choice/s in ovals.**

✓ APPLICATION FOR REGISTRATION (Accomplish Personal Information at the back)

Note: (For Applicant/s with existing Registration Records)

I, _____, Filipino, born on _____, a duly registered voter in Precinct No. _____ of Barangay _____, City/Municipality of _____, Province of _____, do HEREBY APPLY FOR: (Check appropriate box/es)

◯ APPLICATION FOR TRANSFER OF REGISTRATION RECORD

◯ within the same City/Municipality/District ◯ from another City/Municipality/District (Accomplish Personal Information at the back).

My New Residence is:
House No. & Street _____
Barangay_____City/Municipality_____Province_____
I have resided in my new residence for _____ years and for _____ months.

◯ APPLICATION FOR REACTIVATION OF REGISTRATION RECORD

COPY FOR THE ELECTION OFFICER

Reason for Deactivation:

◯ 1. Sentenced by final judgment to suffer imprisonment for not less than one (1) year;
◯ 2. Convicted by final judgment of a crime involving disloyalty to the duly constituted government, etc;.
◯ 3. Declared by competent authority to be insane or incompetent;
◯ 4. Failed to vote in two (2) successive preceding regular elections;
◯ 5. Loss of Filipino citizenship; or
◯ 6. Exclusion by a court order.
◯ 7. Failure to Validate

That said ground no longer exists, as evidenced by the attached certification/order of the court (in cases of 1,2,3,5, and 6).

◯ APPLICATION FOR CHANGE OF NAME DUE TO MARRIAGE OR COURT ORDER/CORRECTION OF ENTRIES IN THE VOTERS' REGISTRATION RECORD

(Attach required supporting documents such as Certified Copy or Certificate of Court Order or Certificate of Live Birth, and others)

Present Data/Information: _____
New/Corrected Data/Information:_____

◯ APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT OF NAME IN THE LIST OF VOTERS

◯ Inclusion of VRR in the precinct book of voters

◯ Reinstatement of the name of the registered voter which has been omitted in the list of voters

I do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct No. _____, be reinstated/included therein. The said reinstatement of name/inclusion of registration record is necessary and valid.

IN WITNESS WHEREOF, I hereunto affix my signature this 24 day of Nov, 2020 at [illegible], Province of [illegible], Philippines.

[illegible]
Signature above printed name

SUBSCRIBED AND SWORN to before me on the above date.

_____
EO/Administering Officer

Application No. A0023001955105

Precinct No. 0615 A

Instructions: (1) Accomplish separately in three copies (2) print legibly, and (3) check the appropriate box.

Part 1 PERSONAL INFORMATION (To be filled out by Applicant)

NAME

Last: Villanueva

First: Daniel Kenneth

Middle: Tan

☐ Illiterate ☐ Person with Disability

☐ Indigenous People

Assisted by: _____

(Please fill up Supplemental Data Form/Assistor's Oath)

RESIDENCE/ADDRESS Province: Metro Manila

City/Municipality: Makati

Barangay: San Lorenzo

House No. / Street: 28-A Hernandez St.

SEX: ☑ Male ☐ Female

DATE OF BIRTH: 04 (Month) 27 (Day) 2000 (Year)

PLACE OF BIRTH

City/ Mun: Pasay

Province: Metro Manila

CITIZENSHIP: Filipino ☑ By Birth ☐ Naturalized ☐ Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)

Date of Naturalization/ Reacquisition: Month ____ Day ____ Year ____ Certificate No. /Order of Approval: _____

CIVIL STATUS

☑ Single

☐ Married

Name of Spouse, If Married: _____

PERIOD OF RESIDENCE

In the City/Mun: No. of Years 10 No. of Months 00

In the Philippines: No. of Years 20

PROFESSION / OCCUPATION: Student

TIN: _____

PART 2 OATH

☑ REGISTRATION ☐ TRANSFER

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualifications of a voter and that I am ☑ not registered in any precinct or ☐ registered in a precinct of another City/Municipality/District in the Philippines. Further, I give consent to the processing of the information stated herein by the Commission on Elections for registration, election and other purposes as may be provided by law including R.P. Blg. 881, R.A. No. 8189, R.A. No. 10367 and R.A. 10173 also known as the Data Privacy Act of 2012.

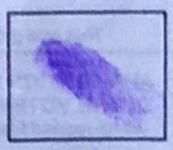
Date: 11 (Month) 28 (Day) 2000 (Year)

Daniel Kenneth Villanueva
Signature of Applicant
Above Printed Name

EO / Administering Officer
(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES

Left Thumb



Right Thumb

1 _____

2 _____

3 _____

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

☐ Approved ☐ Disapproved DATE: Month ____ Day ____ Year ____

With Precinct Assignment No. _____

Reason for disapproval _____

Member (Signature above Printed Name)

Chairman of the Board (Signature above Printed Name)

Member (Signature above Printed Name)

Part 4 VOTER'S IDENTIFICATION NUMBER (To be filled out by Election Officer)

Part I: Precinct Code / Municipality / City Code

Part II: Precinct Assignment

Part III: Month Day Year Name Code Birth Code

ACKNOWLEDGEMENT RECEIPT

Type of Application

- ○ Registration
- ○ Transfer
- ○ Reactivation
- ○ Transfer with Reactivation
- ○ Change of Name/Correction of Entry
- ○ Reinstatement/Inclusion

Application for Registration

Last _____

First _____

Middle _____

Application No. _____

This is to acknowledge receipt of your application. Your application is subject for Approval/Disapproval by the Election Registration Board (ERB). You need not appear in the ERB hearing unless required through a written notice.

Date of ERB Hearing _____

EO/ Interviewer Signature above Printed Name

Republic of the Philippines
COMMISSION ON ELECTIONS
Intramuros, Manila

REVISED CEF

Instruction : **Fill-in completely and legibly the appropriate spaces and check appropriate choice/s in ovals.**

✓ **APPLICATION FOR REGISTRATION** (Accomplish Personal Information at the back)

Note: (For Applicant/s with existing Registration Records)

I, _____, Filipino, born on _____, a duly registered voter in Precinct No. _____ of Barangay _____, City/Municipality of _____ Province of _____, do HEREBY APPLY FOR: (Check appropriate box/es)

◯ **APPLICATION FOR TRANSFER OF REGISTRATION RECORD**

◯ within the same City/Municipality/District ◯ from another City/Municipality/District (Accomplish Personal Information at the back).

My New Residence is:
House No. & Street _____
Barangay_____City/Municipality_____Province_____
I have resided in my new residence for _____ years and for _____ months.

◯ **APPLICATION FOR REACTIVATION OF REGISTRATION RECORD**

COPY FOR THE ELECTION OFFICER

Reason for Deactivation:

◯ 1. Sentenced by final judgment to suffer imprisonment for not less than one (1) year;
◯ 2. Convicted by final judgment of a crime involving disloyalty to the duly constituted government, etc;.
◯ 3. Declared by competent authority to be insane or incompetent;
◯ 4. Failed to vote in two (2) successive preceding regular elections;
◯ 5. Loss of Filipino citizenship; or
◯ 6. Exclusion by a court order.
◯ 7. Failure to Validate

That said ground no longer exists, as evidenced by the attached certification/order of the court (in cases of 1,2,3,5, and 6).

◯ **APPLICATION FOR CHANGE OF NAME DUE TO MARRIAGE OR COURT ORDER/CORRECTION OF ENTRIES IN THE VOTERS' REGISTRATION RECORD**
(Attach required supporting documents such as Certified Copy or Certificate of Court Order or Certificate of Live Birth, and others)

Present Data/Information: _____
New/Corrected Data/Information:_____

◯ **APPLICATION FOR INCLUSION OF RECORDS IN THE BOOK OF VOTERS / REINSTATEMENT OF NAME IN THE LIST OF VOTERS**

◯ Inclusion of VRR in the precinct book of voters

◯ Reinstatement of the name of the registered voter which has been omitted in the list of voters

I do hereby request that my name which has been omitted in the list of voters/my registration record which has not been included in the precinct book of voters of Precinct No. _____, be reinstated/included therein. The said reinstatement of name/inclusion of registration record is necessary and valid.

IN WITNESS WHEREOF, I hereunto affix my signature this 24 day of Nov, 2020 at Makati, Province of Metro Manila, Philippines.

Signature above printed name

SUBSCRIBED AND SWORN to before me on the above date.

EO/Administering Officer

Application No. 6023001 95508

Precinct No. 0615 A

Instructions: (1) Accomplish separately in three copies; (2) print legibly; and (3) check the appropriate box.

Part 1 PERSONAL INFORMATION (To be filled out by Applicant)

NAME

Last: Villanueva

First: Daniel Kenneth

Middle: Tan

☐ Illiterate ☐ Person with Disability

☐ Indigenous People

Assisted by: _____ (Please fill-up Supplemental Data Form/Assistor's Oath)

RESIDENCE/ADDRESS Province: Metro Manila

City/Municipality: Makati

Barangay: San Lorenzo

House No. / Street: 23-A Hernandez St.

SEX: ☑ Male ☐ Female

DATE OF BIRTH: 04 (Month) 27 (Day) 2000 (Year)

PLACE OF BIRTH

City/ Mun: Pasay

Province: Metro Manila

CITIZENSHIP _____ ☐ By Birth ☐ Naturalized ☐ Reacquired

(If naturalized/reacquired, state date of naturalization/reacquisition and Certificate Number of naturalization/order of approval of reacquisition)

Date of Naturalization/ Reacquisition: Month ___ Day ___ Year ___ Certificate No. /Order of Approval ___

CIVIL STATUS

☑ Single

☐ Married

Name of Spouse, If Married: _____

PERIOD OF RESIDENCE

In the City/Mun: No. of Years 10 No. of Months 00

In the Philippines: No. of Years 20

PROFESSION / OCCUPATION: Architect

TIN: ___

PART 2 OATH

☑ REGISTRATION ☐ TRANSFER

I do solemnly swear that the above statements regarding my person are true and correct; that I possess all the qualifications and none of the disqualifications of a voter and that I am ☑ not registered in any precinct or ☐ registered in a precinct of another City/Municipality/District in the Philippines. Further, I give consent to the processing of the information stated herein by the Commission on Elections for registration, election and other purposes as may be provided by law including B.P. Blg. 881, R.A. No. 8189, R.A. No. 10367 and R.A. 10173 also known as the Data Privacy Act of 2012.

Date: 11 (Month) 24 (Day) 2000 (Year)

Daniel Kenneth V. Villanueva

Signature of Applicant

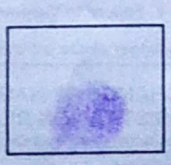
Above Printed Name

_____

EO / Administering Officer

(Signature above Printed Name)

ROLLED THUMBPRINTS / SPECIMEN SIGNATURES



Left Thumb

Right Thumb

1 _____

2 _____

3 _____

Part 3 ACTION BY THE ELECTION REGISTRATION BOARD

☐ Approved ☐ Disapproved

DATE: Month ___ Day ___ Year ___

With Precinct Assignment No. ___

Reason for disapproval _____

_____ Member (Signature above Printed Name)

_____ Chairman of the Board (Signature above Printed Name)

_____ Member (Signature above Printed Name)

Part 4 VOTER'S IDENTIFICATION NUMBER (To be filled out by Election Officer)

Part I: Prov Code / City/Mun/ Dist. Code

Part II: Precinct Assignment

Part III: Month Day Year Name Code / Birth Code

ACKNOWLEDGEMENT RECEIPT

Application No. ___

Type of Application

- ◯ Registration
- ◯ Transfer
- ◯ Reactivation
- ◯ Transfer with Reactivation
- ◯ Change of Name/Correction of Entry
- ◯ Reinstatement/Inclusion

Application for Registration

Last

First

Middle

This is to acknowledge receipt of your application. Your application is subject for Approval/Disapproval by the Election Registration Board (ERB). You need not appear in the ERB hearing unless required through a written notice.

Date of ERB Hearing _____

_____ EO/ Interviewer Signature above Printed Name

REVISED CEF

Republic of the Philippines
COMMISSION ON ELECTIONS
Intramuros, Manila

Instruction : **Fill-in completely and legibly the appropriate spaces and check appropriate choice/s in ovals.**

◯ APPLICATION FOR REGISTRATION (Accomplish Personal Information at the back)

Note: (For Applicant/s with existing Registration Records)

I, _____, Filipino, born on _____, a duly registered voter in Precinct No. _____ of Barangay _____, City/Municipality of _____, Province of _____, do HEREBY APPLY FOR: (Check appropriate box/es)

◯ APPLICATION FOR TRANSFER OF REGISTRATION RECORD

◯ within the same City/Municipality/District ◯ from another City/Municipality/District (Accomplish Personal Information at the back).

My New Residence is:
House No. & Street _____
Barangay _____ City/Municipality _____ Province _____
I have resided in my new residence for _____ years and for _____ months.

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COPY FOR THE ELECTION OFFICER

Reason for Deactivation:

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◯ 2. Convicted by final judgment of a crime involving disloyalty to the duly constituted government, etc;.
◯ 3. Declared by competent authority to be insane or incompetent;
◯ 4. Failed to vote in two (2) successive preceding regular elections;
◯ 5. Loss of Filipino citizenship; or
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(Attach required supporting documents such as Certified Copy or Certificate of Court Order or Certificate of Live Birth, and others)

Present Data/Information: _____
New/Corrected Data/Information: _____

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IN WITNESS WHEREOF, I hereunto affix my signature this 24 day of NOV, 20 20 at MANDAUE, Province of CEBU, Philippines.

Signature above printed name

SUBSCRIBED AND SWORN to before me on the above date.

_____
EO/Administering Officer

Republic of the Philippines
COMMISSION ON ELECTIONS
HEALTH DECLARATION FORM

Full Name (Last, Given, Middle): Villanueva, David Lumanta Jr.	Date (MM/DD/YY): 4/24/20
Complete Current Address (House No., St., Brgy., Municipality/City, Province): 25 A Rodriguez St. Sta Lucia, Mandaluyong City	Time: Temperature:
Mobile/Phone Number: 0906-4673107	Email Address:

Please place a check mark under your response. (Lagyan ng tsek sa angkop na sagot).

		Yes	No
1. Are you experiencing or did you have any of the following in the last 14 days? (Ikaw ba ay nakaranas ng mga sumusunod ng sintomas sa nakaraang 14 na araw)	a. Fever (Lagnat)		✓
	b. Cough and/or Colds (Ubo at/o Sipon)		✓
	c. Body pains (Pananakit ng katawan)		✓
	d. Sore Throat (Pananakit ng lalamunan/masakit lumunok)		✓
	e. Fatigue/Tiredness (Pagkapagod)		✓
	f. Headache (Pananakit ng ulo)		✓
	g. Diarrhea (Pagtatae)		✓
	h. Loss of taste or smell (Nawalan ng panlasa o pang-amoy)		✓
	i. Difficulty of breathing (Pagkahapo o hirap sa paghinga)		✓
2. Have you had face-to-face contact with a probable or confirmed COVID-19 case within 1 meter and for more than 15 minutes for the past 14 days? (May nakasalamuha ka ba na probable o kumpirmadong pasyente na may COVID-19 mula sa isang metrong distansya or mas malapit pa at tumagal ng mahigit 15 minuto sa nakalipas na 14 araw?)			✓
3. Have you provided direct care for a patient with probable or confirmed COVID-19 case without using proper personal protective equipment for the past 14 days? (Nag-alaga ka ba ng probable o kumpirmadong pasyente na may COVID-19 ng hindi nakasuot ng tamang personal protective equipment sa nakalipas na 14 araw?)			✓
4. Have you travelled outside the Philippines in the last 14 days? (Ikaw ba ay nagbyahe sa labas ng Pilipinas sa nakalipas na 14 na araw?)			✓
5. Have you travelled outside in the current city/municipality where you reside? (Ikaw ba ay nagbiyahe sa labas ng iyong lungsod/munisipyo?) If yes, specify which city/municipality you went to (Sabihin kung saan): _____			✓

I hereby certify that the information given are true, correct and complete. I understand that failure to answer any question or any falsified response may have serious consequences. I understand that my personal information is protected by RA 10173 or the Data Privacy Act of 2012 and that this form will be destroyed after 20 days from the date of accomplishment, following the National Archives of the Philippines protocol.

Signature: _____